

CORPORATE CONTRIBUTION



United Way
of Jasper County

COMPANY NAME CONTACT

BILLING ADDRESS CITY ZIP CODE

CONTACT E-MAIL ADDRESS CONTACT TELEPHONE NUMBER

PRESIDENT/CEO

CONTRIBUTION INFORMATION

Total Pledge \$ _____

BILLING INSTRUCTIONS

Please choose one:

Our gift is a corporate employee match: 50% 100% ____%.

Our gift is a corporate gift.

Please bill us for the balance due.

Once on (date) ____ / ____
Month/Year

Quarterly beginning in (circle one) December March June September

PLEASE LET US KNOW THE FOLLOWING

This is exactly how our company should be listed in printed publications:

YES, in addition to a corporate gift to the annual campaign, we will donate to the United Way of Jasper County Endowment fund for the long term benefit of our community.

Please make check payable to : United Way of Jasper County Endowment

PLEASE SIGN AND DATE

x _____
Signature: REQUIRED (your signature authorizes your company's pledge) **Date**

Thank you for your gift!

No services or goods have been given relative to this contribution. This form should not be used for auction or special event donations.